



**FALCON PRIVATE BANK**  
SWISS PRIVATE BANKING

By courier  
US Bankruptcy Court  
Southern District of New York  
One Bowling Green  
New York, NY 10004-1408

Zurich, November 18, 2016

**RE LEHMAN BROTHERS HOLDINGS, INC. CASE NO. 08-13555 (JMP)**

Dear Sir or Madam

Pleas find enclosed a duly filled and signed Form 210A.

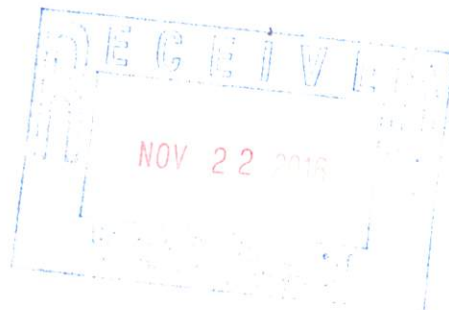
- |  |   |   |
|--|---|---|
| <input type="checkbox"/> for your information      | <input checked="" type="checkbox"/> for execution | <input type="checkbox"/> returned with thanks |
| <input type="checkbox"/> for signature             | <input type="checkbox"/> for approval             | <input type="checkbox"/> for examination      |
| <input checked="" type="checkbox"/> for your files | <input type="checkbox"/> for statement            | <input type="checkbox"/> please contact me    |
| <input type="checkbox"/> according to your letter  | <input type="checkbox"/> as per conversation      | <input type="checkbox"/> please return        |

Sincerely yours,  
Falcon Private Bank Ltd.

Form without signature

Enclosure

- Form 210A



B 210A (Form 210A) (12/09)

## UNITED STATES BANKRUPTCY COURT

Southern District of New York

In re Lehman Brothers Holdings, Inc.,

Case No. 08-13555 (JMP)

### TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee hereby gives evidence and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice.

Falcon Private Bank Ltd.  
Name of Transferee

Bank Hapoalim (Switzerland) Ltd  
Name of Transferor

Name and Address where notices to transferee  
should be sent:  
Legal & Compliance, Pelikanstrasse 37,  
CH-8001 Zürich (Switzerland)

Court Claim # (if known): 55855  
Amount of Claim: \$200,000.00  
Date Claim Filed: 10/16/2009

Phone: +41 44 227 55 55  
Last Four Digits of Acct #: \_\_\_\_\_

Phone: +41 44 283 81 81  
Last Four Digits of Acct. #: 2744

Name and Address where transferee payments  
should be sent (if different from above):

Phone: \_\_\_\_\_  
Last Four Digits of Acct #: \_\_\_\_\_

I declare under penalty of perjury that the information provided in this notice is true and correct to the best of my knowledge and belief.

By: My Chau Ha Manuel Graf  
Transferee/Transferor's Agent

Date: 11/16/2016

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 & 3571.*

